

STATE OF CALIFORNIA—HEALTH AND HUMAN SERVICES AGENCY DEPARTMENT OF SOCIAL SERVICES

744 P Street • Sacramento, CA 95814 • www.cdss.ca.gov



July 2, 2009

Ms. Beverly R. Normberg, Executive Director La Familia Inc. 707 Broadway N.E. #103 Albuguerque, New Mexico 87102

SUBJECT: ANNUAL CERTIFICATION RENEWAL

Dear Ms. Normberg:

Pursuant to California Family Code, Section 7911 et al., this is official notification that La Familia Deaf Group Home certification by the California Department of Social Services is continued through July 2010.

Certification will be reviewed annually. The Out-of-State Certification Unit (OSCU) will be honoring the Department's policy of having inspection authority to make visits with or without appointment.

If you have any questions regarding this matter, please feel free to contact me, Olaniyan Akyeem at (916) 838-5875

Sincerely,

OLANIYAN AKYEEM

Out-of-State Certification Analyst

CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION

CCLD Regional Office, 8745 FOLSOM BLVD., #130 SACRAMENTO, CA 95826

FACILITY EVALUATION REPORT

FACILITY NAME: LA FAMILIA

ADMINISTRATOR: NOMBERG, BEVERLY

602300042

ADDRESS:

8249 EVANGELINE COURT

FACILITY TYPE:

CITY:

1 2 3

4

56

7 8

9

10

11

12 13 14

18 19

20 21

22

23 24

25

8249 EVANGELINE COUR

TELEPHONE:

FACILITY NUMBER:

(505) 440-3512 87109

731

CAPACITY:

N.E. ALBUQUERQUE

STATE: NM CENSUS: 5

ZIP CODE: 87109 **DATE:** 06/29/2009

TYPE OF VISIT:

Case Management

UNANNOUNCED :

TIME BEGAN: TIME COMPLETED:

08:00 AM 05:00 PM

MET WITH:

David Sorenson, Program Director

NARRATIVE

PURPOSE OF VISIT:

As mandated by California law, the purpose of this annual re-certification evaluation by the California Department of Social Services (CDSS) to verify the facility continues to:

- have adequate and appropriate resources to provide safe, suitable 24-hour residential care, supervision and treatment services to youth/clients in care.
- remain in substantial compliance with California licensing standards and regulations as well as remaining licensed and in good standing with the licensing authorities within their own state of geographical location.
- NOTE: this 2009 annual facility evaluation was conducted via telephone. All relevant documentation required for this annual re-certification has been provided by La Familia, received to the State California Licensing, Out-of-State Certification Unit and verified by the State of New Mexico licensing authorities.

CALIFORNIA PLACING AGENCIES:

La Familia did not have any current or pending contracts with any California placement agencies at the time of this annual re-certification evaluation. No California youth in placement at this time.

FACILITY, PHYSICAL PLANT AND PROGRAM REVIEW CHANGES:

The most recent fire inspection was conducted by the City of Albuquerque Fire Marshal's Office in September 2008. (Follow-up required, see attached Plan of Correction (POC)).

(See LIC 809 C continued)

SUPERVISOR'S NAME: Mei Yuk Kung

TELEPHONE: (916) 327-8763

LICENSING EVALUATOR NAME: Olaniyan Akyeem

TELEPHONE: (916) 838-5875

LICENSING EVALUATOR SIGNATURE:

DATE: 06/29/2009

I acknowledge receipt of this form and understand my licensing appeal rights as explained and received.

FACILITY REPRESENTATIVE SIGNATURE:

I signiture on file

DATE: 06/29/2009

This report must be available at Child Care and Group Home facilities for public review for 3 years.

LIC809 (FAS) - (06/04)

Page: 1 of 2

CCLD Regional Office, 8745 FOLSOM BLVD., #130 SACRAMENTO, CA 95826

FACILITY EVALUATION REPORT (Cont)

FACILITY NAME: LA FAMILIA

FACILITY NUMBER: 602300042 **VISIT DATE: 06/29/2009**

NARRATIVE

(LIC 809 C continued)

The last licensing inspection was conducted by the State of New Mexico Children, Youth and Families Department on June 18, 2009. The licensing representative reported that La Familia was found to be operating within compliance and has not had any substantiated complaints within the last year.

SCOPE OF CERTIFICATION REVIEW:

8

Certification review covered the following areas:

LOCAL STATE LICENSING / COMPLAINTS ISSUES:

13 14

Follow-up with New Mexico Licensing representative; Operators License; Fire clearance, Program updates/changes, License, emergency intervention / Incident report requirements.

15 16 17

OUT-OF-STATE CERTIFICATION FINDINGS, VIOLATIONS AND PLAN OF CORRECTIONS:

18 19 20

1. Fire Clearance: According to the City of Albuquerque Fire Marshall, the fire inspection conducted in September 2008 is considered invalid due to billing issue / accounts payable. Please provide an update on this issue and/or copy of a valid fire inspection for last 12 months.

21 22 23

24

2. Reporting Requirements: The NCH file review conducted in California revealed no Special Incidents had been received and/or reported in the last year. California Licensing, Out-of State certification standards require incidents to be reported on all youth in placement regardless if he/she is a California placement youth.

25 26 27

Provide a plan to ensure special incidents are reported as pertaining to the California Licensing, Out-of-State Certification standards.

28 29 30

Please provide a Plan Of Correction (POC) to the above deficiency by July 24, 2009.

31 32

CERTIFICATION DECISION Re-certification Approved

SUPERVISOR'S NAME: Mei Yuk Kung

TELEPHONE: (916) 327-8763

LICENSING EVALUATOR NAME: Olaniyan Akyeem

TELEPHONE: (916) 838-5875

LICENSING EVALUATOR SIGNATURE:

DATE: 06/29/2009

I acknowledge receipt of this form and understand my appeal rights as explained and received.

FACILITY REPRESENTATIVE SIGNATURE:

rignal signature on film

DATE: 06/29/2009